

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) House Majority PAC			FEC IDENTIFICATION NUMBER ▼ C C00495028		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					

Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies			Date M M / D D / Y Y Y Y Y Y 10 / 03 / 2012		
Mailing Address 3050 K Street, NW Suite 100			Amount 76633.80		
City Washington	State DC	Zip Code 20007	Transaction ID : D645560		
Purpose of Expenditure Television Advertising		Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 87996.60			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

Full Name (Last, First, Middle Initial) of Payee Murphy Vogel Askew Reilly LLC			Date M M / D D / Y Y Y Y Y Y 10 / 03 / 2012		
Mailing Address 901 N. Washington Street Suite 400			Amount 11362.80		
City Alexandria	State VA	Zip Code 22314	Transaction ID : D646571		
Purpose of Expenditure Media Production Costs		Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: Abel Maldonado			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 87996.60			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	87996.60
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shannon Roche

[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y
10 / 05 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) House Majority PAC		FEC IDENTIFICATION NUMBER ▼ C C00495028	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Baughman Company, Inc.			Date MM / DD / YYYY 10 / 03 / 2012	
Mailing Address 1782 Union Street			Amount 16112.20	
City San Francisco	State CA	Zip Code 94123-4449	Transaction ID : D646572	
Purpose of Expenditure Direct Mail		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Judy Biggert			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 66431.84			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee The Baughman Company, Inc.			Date MM / DD / YYYY 10 / 04 / 2012	
Mailing Address 1782 Union Street			Amount 14257.86	
City San Francisco	State CA	Zip Code 94123-4449	Transaction ID : D646586	
Purpose of Expenditure Direct Mail		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Allen B. West			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 643584.58			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	30370.06
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shannon Roche

[Electronically Filed]

Date

MM / DD / YYYY
10 / 05 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)
House Majority PAC

FEC IDENTIFICATION NUMBER ▼

C C00495028

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Mack Crounse Group

Date

MM / DD / YYYY
10 / 05 / 2012

Mailing Address 2001 N. Beauregard Street

Amount

25549.21

City State Zip Code
Alexandria VA 22311

Transaction ID : D646577

Purpose of Expenditure
Direct Mail

Category/
Type

Office Sought: ☒ House State: NY
☐ Senate District: 19
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Christopher P. Gibson

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

25549.21

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mission Control, Inc.

Date

MM / DD / YYYY
10 / 04 / 2012

Mailing Address 114 A Mansfield Hollow Road

Amount

17395.20

City State Zip Code
Mansfield Center CT 06250

Transaction ID : D646590

Purpose of Expenditure
Direct Mail

Category/
Type

Office Sought: ☒ House State: NH
☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Frank Guinta

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

69651.80

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

42944.41

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shannon Roche

[Electronically Filed]

Date

MM / DD / YYYY
10 / 05 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) House Majority PAC		FEC IDENTIFICATION NUMBER ▼ C C00495028	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Pivot Group		Date MM / DD / YYYY 10 / 05 / 2012	
Mailing Address 1720 I Street, NW Suite 520		Amount 27505.60	
City Washington	State DC	Zip Code 20006	Transaction ID : D646580
Purpose of Expenditure Direct Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Raymond J. Cravaack		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 419249.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	27505.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	188816.67

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shannon Roche

[Electronically Filed]

Signature

Date

MM / DD / YYYY
10 / 05 / 2012